of Management and Budget (OMB) approval for the following public information collection pursuant to the Paperwork Reduction Act of 1980, Pub. L. 96–511. For further information contact Shoko B. Hair, Federal Communications Commission, (202) 418–1379.

#### **Federal Communications Commission**

OMB Control No.: 3060-0508.

*Title:* Rewrite and Update of Part 22 of the Public Mobile Service Rules (CC Docket No. 92–115).

Expiration Date: 10/31/97.

Estimated Annual Burden: 257,616 total annual hours; .25 - 600 hours per

response.

*Description:* Title III of the Communications Act of 1934, as amended, 47 U.S.C. Sections 301 et. seq., governs the licensing of all communications services which operate through the use of radio frequencies. Part 22 of the FCC Rules contains the technical and legal requirements for mobile radio stations which are classified as common carriers. The services covered by Part 22 are: Air-Ground Radiotelephone Service; Cellular Radiotelephone Service; Offshore Radiotelephone Service; Paging and Radiotelephone Service; and Rural Radiotelephone Service. In CC Docket No. 92-115, the Commission revised in its entirety Part 22 of its rules. The revisions were made to improve the organization and clarity of the Commission's rules by eliminating outdated provisions and unnecessary information collection requirements, streamlining and expediting licensing and processing procedures, and affording licensees greater flexibility in providing services to the public.

Federal Communications Commission.

#### William F. Caton,

Acting Secretary.

[FR Doc. 95-374 Filed 1-6-95; 8:45 am]

BILLING CODE 6712-01-F

# FEDERAL RETIREMENT THRIFT INVESTMENT BOARD

# **Employee Thrift Advisory Council; Open Meeting**

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), a notice is hereby given of the following committee meeting:

Name: Employee Thrift Advisory Council.

Time: 10:00 A.M. Date: January 24, 1995.

Place: Fourth Floor, Conference Room, Federal Retirement Thrift Investment Board, 1250 H Street, NW., Washington, DC. Status: Open.

Matters to be considered:

Approval of the minutes of the June 14, 1994, meeting; report of the Executive Director on the status of the Thrift Savings Plan; legislation; nomination of Council Chairman and election of Vice-Chairman; and new business.

Any interested person may attend, appear before, or file statements with the Council. For further information contact John J. O'Meara, Committee Management Officer, on (202) 942–1660.

Dated: January 4, 1995.

#### Roger W. Mehle,

Executive Director, Federal Retirement Thrift Investment Board.

[FR Doc. 95–514 Filed 1–5–95; 9:32 am] BILLING CODE 6760–01–M

# DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

### Advisory Committee to the Director, Centers for Disease Control and Prevention: Meeting

In accordance with section 10(a)(2) of the Federal Advisory Committee Act (Pub. L. 92–463), the Centers for Disease Control and Prevention (CRC) announces the following committee meeting.

Name: Advisory Committee to the Director, CDC.

Time and date: 8:30 a.m.-3 p.m., January 27, 1995.

Place: CDC, Auditorium A, 1600 Clifton Road, NE., Atlanta, Georgia 30333.

Status: Open to the public, limited only by the space available.

Purpose: This committee advises the Director, CDC, on policy issues and broad strategies that will enable CDC, the Nation's prevention agency, to fulfill its mission of promoting health and quality of life by preventing and controlling disease, injury, and disability. The committee recommends ways to incorporate prevention activities more fully into health care. It also provides guidance to help CDC work more effectively with its various constituents, in both the private and public sectors, to make prevention a practical reality.

Matters to be discussed: The agenda will include updates from CDC Director, David Satcher, M.D., Ph.D., followed by committee discussion on health communication at CDC, reorganization of HIV/AIDS activities, the CDC foundation, and plans for a CDC museum. The remainder of the meeting will be used for a committee discussion on CDC's options for improving grant program implementation. Agenda items are subject to change as priorities dictate.

Contact person for more information: Martha F. Katz, Executive Secretary, Advisory Committee to the Director, CDC, 1600 Clifton Road, NE., Mailstop D–23, Atlanta, Georgia 30333, telephone 404/639–3243.

Dated: January 3, 1995.

#### William H. Gimson,

Acting Associate Director for Policy Coordination, Centers for Disease Control and Prevention (CDC).

[FR Doc. 95–399 Filed 1–6–95; 8:45 am]

BILLING CODE 4163-18-M

### National Committee on Vital and Health Statistics (NCVHS) Subcommittee on Medical Classification Systems and NCVHS Subcommittee on Ambulatory and Hospital Care Statistics: Meetings

Pursuant to Pub. L. 92–463, the National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC), announces the following subcommtitee meetings.

Name: NCVHS Subcommittee on Medical Classification Systems.

Time and date: 9:30 a.m.-12:30 p.m., January 24, 1995.

Place: Room 703A, Hubert H. Humphrey Building, 200 Independence Avenue, SW, Washington, D.C. 20201.

Status: Open.

Purpose: The Subcommittee on Medical Classification Systems will discuss the International Classification of Diseases-9-Coordination Maintenance (ICD–CM) and ICD–10 issues, ICD–9–CM Volume III contract; and review the subcommittee's charge and work plan for 1995.

Name: NCVHS Subcommittee on Medical Classification Systems and NCVHS Subcommittee on Ambulatory and Hospital Care Statistics.

Time and date: 1:30 p.m.-5 p.m., January 24, 1995.

Place: Room 703A, Hubert H. Humphrey Building, 200 Independence Avenue, SW, Washington, D.C. 20201.

Status: Open.

Purpose: The Subcommittee on Medical Classification Systems and the Subcommittee on Ambulatory and Hospital Care Statistics will meet jointly to discuss the uniform core data set for the encounter and enrollment project.

Name: NCVHS Subcommittee on Ambulatory and Hospital Care Statistics. Time and date: 9 a.m.-3:30 p.m., January

25, 1995.
Place: Room 703A, Hubert H. Humphrey

Building, 200 Independence Avenue, SW, Washington, D.C. 20201.

Status: Open.

Purpose: The Subcommittee on Ambulatory and Hospital Care Statistics will discuss core data sets for ambulatory and hospital care, and consider other issues included in its charge.

Contact person for more information: Substantive program information as well as summaries of the meeting and a roster of committee members may be obtained from Gail F. Fisher, Ph.D., Executive Secretary, NCVHS, NCHS, CDC, Room 1100, Presidential Building, 6525 Belcrest Road, Hyattsville, Maryland 20782, telephone 301/436–7050.

Dated: January 3, 1995.

#### William H. Gimson,

Acting Associate Director for Policy Coordination, Centers for Disease Control and Prevention (CDC).

[FR Doc. 95–397 Filed 1–6–95; 8:45 am] BILLING CODE 4163–18–M

### Health Resources and Services Administration

#### Program Announcement and Proposed Review Criteria for Grants for Geriatric Education Centers for Fiscal Year 1995

The Health Resources and Services Administration (HRSA) announces the acceptance of applications for fiscal year (FY) 1995, Grants for Geriatric Education Centers under the authority of section 777(a) of the Public Health Service Act, as amended by the Health Professions Education Extension Amendments of 1992, Pub. L. 102–408, dated October 13, 1992. Comments are invited on the proposed review criteria.

Approximately \$6,000,000 will be available in FY 1995 for this program. Total continuation support recommended is \$4,100,000. It is anticipated that \$1,900,000 will be available to support 13 competing awards averaging \$145,000.

Applicants should apply for direct costs of no more than \$100,000 (for single institutions) and no more than \$150,000 (for consortia of three of more institutions) for the first year of funding.

## **Eligibility**

Section 777(a) of the PHS Act authorizes the award of grants to accredited health professions schools as defined by section 799(1), or programs for the training of physician assistants as defined by section 799(3), or schools of allied health as defined in section 799(4), or schools of nursing as defined by section 853(2).

Applicants must be located in the United States, the Commonwealth of Puerto Rico, the Commonwealth of the Northern Mariana Islands, the Virgin Islands, Guam, American Samoa, the Republic of Palau, the Republic of the Marshall Islands, or the Federated States of Micronesia.

To receive support, applicants must meet the requirements of regulations as set forth in 42 CFR part 57, subpart 00. The initial period of Federal support should not exceed 3 years. Projects may recompete for an additional 3 years.

### Purpose

Grants may be awarded to support the development of collaborative

arrangements involving several health professions schools and health care facilities. These arrangements, called Geriatric Education Centers (GECs), are established to facilitate training of health professional faculty, students, and practitioners in the diagnosis. treatment, and prevention of disease, disability, and other health problems of the aged. Health professionals include allopathic physicians, osteopathic physicians, dentists, optometrists, podiatrists, pharmacists, nurses, nurse practitioners, physician assistants, chiropractors, clinical psychologists, health administrators, and allied health professionals.

Projects supported under these grants must offer training involving four or more health professions, one of which must be allopathic or osteopathic medicine. Projects must address one or more of the statutory purposes listed below:

(a) Improve the training of health professionals in geriatrics;

(b) Develop and disseminate curricula relating to the treatment of the health problems of elderly individuals;

(c) Expand and strengthen instruction in methods of such treatment;

(d) Support the training and retraining of faculty to provide such instruction;

(e) Support continuing education of health professionals and allied health professionals who provide such treatment; and

(f) Establish new affiliations with nursing homes, chronic and acute disease hospitals, ambulatory care centers, and senior centers in order to provide students with clinical training in geriatric medicine.

Grant supported projects may be designed to accomplish the statutory purposes in a variety of ways, emphasizing interdisciplinary/ multidisciplinary, and disciplinespecific approaches to the development of geriatric education resources. For example:

• Health professions schools within a single academic health center, or a consortium of several educational institutions, may share their educational resources and expertise through a Geriatric Education Center to extend a broad range of multidisciplinary educational services outward to other institutions, faculty, facilities and practitioners within a geographic area defined by the applicant.

• Educational institutions that have limited geriatric education resources and which traditionally have had linkages to a geographic area where substantial geriatric education needs exist, may seek to establish a Geriatric Education Center. Such a center could

be designed to enhance and expand the capability of collaborating professional schools to provide geriatric education resources in the geographic area in need.

• Projects may support the development of Geriatric Education Centers designed to focus on multidisciplinary geriatric education emphasizing high priority services and high risk groups among the elderly, minority aging, or other special concerns.

# National Health Objectives for the Year 2000

The Public Health Service (PHS) urges applicants to submit work plans that address specific objectives of Healthy People 2000. Potential applicants may obtain a copy of *Healthy People 2000* (Full Report; Stock No. 017–001–00474–0) or *Healthy People 2000* (Summary Report; Stock No. 017–001–00473–1) through the Superintendent of Documents, Government Printing Office, Washington, D.C. 20402–9325 (Telephone 202–783–3238).

## **Education and Service Linkage**

As part of its long-range planning, HRSA will be targeting its efforts to strengthening linkages between U.S. Public Health Service supported education programs and programs which provide comprehensive primary care services to the underserved.

### **Smoke-Free Workplace**

The Public Health Service strongly encourages all grant recipients to provide a smoke-free workplace and promote the non-use of all tobacco products. This is consistent with the PHS mission to protect and advance the physical and mental health of the American people.

# Established and Proposed Review Criteria

The following review criteria have been established in 42 CFR part 57, subpart OO and will be considered in the review of applications:

(1) The degree to which the proposed project adequately provides for the project requirements;

(2) The extent to which the rationale and specific objectives of the project are based upon a needs assessment of the status of geriatrics training in the institutions to be assisted and/or the geographic area to be served;

(3) The ability of the project to achieve the project objectives within the

proposed geographic area;

(4) The adequacy of educational facilities and clinical training settings to accomplish objectives;